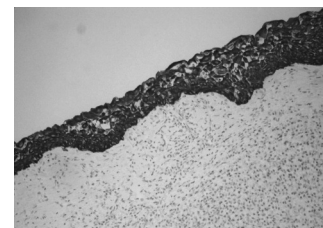


Glandular odontogenic cyst: report of a new case with cytokeratin-19 expression

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The glandular odontogenic cyst (GOC) was a rare jawbone cyst described in 1988 by Gardner et al.¹ as a distinct entity. This lesion can involve either jaw, but the anterior region of the mandible was the most commonly affected area. Clinical and radiographic findings were not specific, and the diagnosis of GOC can be extremely difficult due to the rarity of this lesion. The cyst presented a wall constituted by fibrous connective tissue and was lined by a non-keratinized stratified squamous epithelium of variable thickness. Large areas of the lining epithelium presented cylinder cells, sometimes ciliated. A variable amount of mucina was occasionally noted. Due to the strong similarities, this cyst can be easily misdiagnosed as a central mucoepidermoid carcinoma (CMEC). Immunohistochemistry may be

an aid in diagnosis; in fact Pires et al.² have demonstrated that there were differences in the expression of cytokeratins (CK) in GOC and CMEC. In this study, we reported a new case of GOC in a 38-year-old female patient. The lesion was asymptomatic and was discovered as an incidental finding by a dentist some months before. Oral examination showed normal appearance and color of mucosa. Radiographic examination showed a well-defined, unilocular lesion extending in the left mandible anterior body, in an intraradicular position. The teeth were all vital. The lesion was subjected by surgical enucleation, and the material was sent for histopathological examination. Histopathological analysis of the lesion revealed cyst wall with focally ciliated epithelium lining of variable thickness. The superficial layer of the epithelium showed metaplastic mucous cell with intraepithelial microcystic area. The results of immunohistochemistry revealed strong positive activity for CK 19 in all layer of the epithelium. The postoperative course was uneventful, and there was no recurrence during the 18 months follow-up period.

References

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